



PTO/SB/22 (12-04)

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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)<br/>FY 2005</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)   |        | Docket Number (Optional)<br>436.006 |           |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
|--|--------|-------------------------------------|-----------|--|-----|------------------|--|--|-------|------|----|---|-------|-------|----|--|--------|-------|-----------|--|--------|-------|----|--|--------|--------|----|
| Application Number      10/687,703-Conf. #2842   |        | Filed      October 20, 2003         |           |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| For      METHODS AND APPARATUS FOR AUDIO DATA MONITORING USING SPEECHRECOGNITION   |        |                                     |           |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| Art Unit      2654   |        | Examiner      V. P. Harper          |           |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 40%;"></th><th style="width: 15%; text-align: center;">Fee</th><th style="width: 15%; text-align: center;">Small Entity Fee</th><th style="width: 30%;"></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: center;">\$120</td><td style="text-align: center;">\$60</td><td style="text-align: center;">\$</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: center;">\$450</td><td style="text-align: center;">\$225</td><td style="text-align: center;">\$</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: center;">\$1020</td><td style="text-align: center;">\$510</td><td style="text-align: center;">\$ 510.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: center;">\$1590</td><td style="text-align: center;">\$795</td><td style="text-align: center;">\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: center;">\$2160</td><td style="text-align: center;">\$1080</td><td style="text-align: center;">\$</td></tr></tbody></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number      <u>06-2375</u></p><br><p>I am the      <input type="checkbox"/> applicant/inventor.</p> <p style="margin-left: 100px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 100px;"><input type="checkbox"/> attorney or agent of record. Registration Number      _____</p> <p style="margin-left: 100px;"><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.</p> <p style="margin-left: 100px;">Registration number if acting under 37 CFR 1.34      <u>32,443</u></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%; text-align: center;"><hr style="width: 80%; margin: 5px auto;"/><p style="margin: 0;">Signature</p><hr style="width: 80%; margin: 5px auto;"/><p style="margin: 0;">Michael J. Strauss</p><p style="margin: 0;">Typed or printed name</p></div><div style="width: 45%; text-align: center;"><hr style="width: 80%; margin: 0 auto;"/><p style="margin: 0;">September 23, 2005</p><p style="margin: 0;">Date</p><hr style="width: 80%; margin: 5px auto;"/><p style="margin: 0;">(202) 662-4632</p><p style="margin: 0;">Telephone Number</p></div></div> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of      <u>1</u>      forms are submitted.</p> |        |                                     |           |  | Fee | Small Entity Fee |  | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ 510.00 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ |
|  | Fee    | Small Entity Fee                    |           |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120  | \$60                                | \$        |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$450  | \$225                               | \$        |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1020 | \$510                               | \$ 510.00 |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$1590 | \$795                               | \$        |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$2160 | \$1080                              | \$        |  |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |

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